Washington, DC 20549

FORM D

NOTICE OF SALE OF SECURITIES



1299788

PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USI	E ONLY
Prefix	Serial
DATE RE	CEIVED

10.11.100					
Name of Offering (: check if this is an amendment and name has changed, and indicate change.)					
Secured Liquidity Notes					
Filing Under (Check box(es) that apply)://: Rule 504 // Rule 505 /X/: Rule 506	:// Section 4(6) // LOE				
Type of Filing: /X /: New Filing : // Amendment					
A. BASIC IDENTIFICATION DATA					
1. Enter the information requested about the issuer					
	18 A SA				
Name of Issuer (: check if this is an amendment and name has changed, and indicate change.)	0 6				
Thornburg Mortgage Capital Resources, LLC					
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Excluding Area Code)				
	505-989-1900				
150 Washington Avenue, Suite 302, Santa Fe, New Mexico 87501					
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)				
(if different from Executive Offices)	L				
Brief Description of Business	1 1 1 1 T				
The Issuer is part of a mortgage backed securities conduit program	under which the Issuer will issue				
secured liquidity notes.					
• •					
Type of Business Organia De CESSED					
: // corporation //: limited partnership, already formed	/ X/: other (please specify):LLC				
	7 A. Other (please specify). LLC				
//: business trust 4UG 06 2004, //: limited partnership, to be formed					
THOMSON Month Year					
FINANCIAL WORLD	٦				
Actual or Estimated Date of Incorporation or Organization: 0 5 0 4	X Actual : Estimated				
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation					
CN for Canada; FN for other foreign jurisdiction) CN for Canada; FN for other foreign jurisdiction)					
GENERAL INSTRUCTIONS					
Federal:					
Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.					
77d(6).					
· /					
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering	A notice is deemed filed with the LLS. Securities and				
When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it					
is due, on the date it was mailed by United States registered or certified mail to that address.					
Where to File: U.S. Securities and Evolunge Commission, 450 Fifth Street, N.W. Washington, D.C. 20549					
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.					
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manual that copies of the manually signed copy to be the manual transfer of the manually signed copy to be the manual transfer of th	illy signed. Any copies not manually signed must be				
photocopies of the manually signed copy or bear typed or printed signatures. **Information Permised: A page filing must center all information requested. A mondments need only report the name of the insuer and offering, any changes.					
Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need					
not be filed with the SEC.					

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Filing Fee: There is no federal filing fee.

A. BASIC IDENTIFICATION DATA

- Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and managing partner of partnership issuers.

Check Box(es) that Apply: //: Promoter :// Beneficial Owner :// Executive Officer :// Director // General and/or Managing Partner /X/ Sole Member of the Sole Member of Issuer

Full Name (Last name first, if individual)

Thornburg Mortgage, Inc.

Business or Residence Address (Number and Street, City, State, Zip Code)

150 Washington Avenue, Suite 302, Santa Fe, New Mexico 87501

Check Box(es) that Apply: // Promoter :/X/ Beneficial Owner :// Executive Officer :// Director // General and/or Managing Partner /X/ Sole Member of the Issuer

Full Name (Last name first, if individual)

Thornburg Mortgage Depositor, L.L.C.

Business or Residence Address (Number and Street, City, State, Zip Code)

150 Washington Avenue, Suite 302, Santa Fe, New Mexico 87501

Check Box(es) that Apply: //: Promoter :// Beneficial Owner //: Executive Officer :// Director //: General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: // Promoter :// Beneficial Owner //: Executive Officer // Director //: General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: //: Promoter :// Beneficial Owner //: Executive Officer //: Director //: General and/or Managing Partner

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

B. INFORMATION ABOUT OFFERING

											Yes	No
1. H	. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							:	: X			
2. W	· · · · · · · · · · · · · · · · · · ·								\$250,00	00		
3. D	Does the offering permit joint ownership of a single unit?							Yes X	No :			
co If or	ommissior a person states, lis	or similar to be listed t the name	requested for remuneration is an associat of the broker ay set forth the	for solicitated person of dealer.	ation of pu or agent of If more tha	rchasers in c a broker or on an five (5) pe	connection wi dealer register ersons to be li	th sales of se red with the S	curities in th SEC and/or v	e offering.		·
Full Na	me (Last r	name first, i	f individual)									
745 Sev Name o	renth Ave f Associat	nue, 3 rd Flo ed Broker o	ss (Number a oor, New Yor or Dealer			Zip Code)						
	n Broth		d Has Solicite	ed or Intend	s to Solicit	Purchasers						·
(Check	"All State	s" or check	individual St	ates)							ll States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ull Na	me (Last	name first,	if individual	<u>)</u>		 						
4 Worl	ld Finan	cial Cente	r, 11 th Floor									
		ed Broker o Ioney Marl										
States in	n Which P	erson Liste	d Has Solicite							V.: A	ll States	
AL]	[AK]	[AZ]	individual St [AR]	ates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
ull Na	me (Last i	name first, i	f individual)	····				<u> </u>				
85 Bro	ad Stree	t, 9th Floo	ss (Number a			Zip Code)						
	of Association	ed Broker	or Deale									·
States in	n Which F	erson Liste	d Has Solicite		ls to Solici	t Purchasers						
(Check [AL]	"All State [AK]	s" or check [AZ]	individual St [AR]	ates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]	X , <i>i</i> [GA]	All States [HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
m	[၁၀]	[၁ဟ]	[111]	$[\Lambda]$	[01]	[,]	[4 77]	[** 5.7]	[** *]	[** 1]	[AA T]	[1.17]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this		
box 0 and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$5,000,000,000	\$1,000,000,000
Equity	\$	\$
: Common : Preferred		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify)	. s	\$
Total	\$5,000,000,000	\$1,000,000,000
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		<u> </u>
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	0	\$ <u>0</u>
Non-Accredited Investors		\$
Total (for filings under Rule 504 only)	·	\$
 If this filing is an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of Offering 	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A	•	\$
Rule 504		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. *		
Transfer Agent's Fees	. :	\$ <u>22,500</u>
Printing and Engraving Costs	. :	\$
Legal Fees	. :X	\$ <u>550,000</u>
Accounting Fees	. :	\$
Sales Commission (specify finders' fees separately)		\$45,350
Other Expenses (identify) Rating Agencies Fees, Structuring Fee, Data Acquisition Fee, Blue Sky		\$1,514,570
Administration Fee, and LLC Springing Member Fee		Ψ <u>Ι. Ο Ι. Τ. Ι. Ο</u>
* Securities will be issued under this program on an ongoing basis and will incur sales commissions and annufees such as rating agency fees, pricing fees, transfer agent fee and LLC springing member fees in the future.		\$ <u>2,132,420</u>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS $% \left(\mathbf{r}\right) =\left(\mathbf{r}\right)$

b. Enter the difference between the aggre Part C- Question 1 and total expenses fur This difference is the "adjusted gross pro			\$ <u>4,</u> 9	997,867,580				
5. Indicate below the amount of the adjusted great to be used for each of the purposes shown. I furnish an estimate and check the box to t payments listed must equal the adjusted gross to Part C – Question 4.b above.	f the amount for any purpose is not known, he left of the estimate. The total of the							
20 1 2 4 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Payments to Officers, Directors, and Affiliates	Pay	yments to Others			
Salaries and fees		:	\$:	\$			
Purchase of real estate		:	\$:	\$			
Purchase, rental or leasing and installation of machine	nery and equipment	:	\$:	\$			
Construction or leasing of plant buildings and facilities			\$:	\$			
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		•	\$	•	\$			
Repayment of indebtedness			¢		•			
• •		•	Φ	•	Φ			
Working capital		٠	\$	•	\$			
Other (specify): Finance the Purchase of Mortgag		:	\$:	\$ <u>4,997,867,580</u>			
		:	\$:	\$			
Column Totals		:	\$:	\$			
Total Payments Listed (column totals added)			:	\$4.99	7,867,580			
2000 20,00000 20000 (0000000 000000)			·	\$ <u>.,,,,</u>	<u> </u>			
	D. FEDERAL SIGNATURE							
The issuer has duly caused this notice to be signer following signature constitutes an undertaking by request of its staff, the information furnished by the	the issuer to furnish to the U.S. Securities and	d Ex	change Comm	ission,	upon written			
Issuer (Print or Type)	Signature	//	Dat					
Thornburg Mortgage Capital Resources, LLC	1 15h V. ()	1/		7 -	-30-04			
Name of Signer (Print or Type)	Title of Signer (Print or Type)				00 0			
John D. Clarke	Assistant Vice President and Por	rtfo	olio Manag	er of	Thornburg			
	Mortgage, Inc., the Manager of Thornburg Mortgage							
	Depositor, LLC, the Manager of the Issuer							